PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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UTILITY						
PATENT APPLICATION						
TRANSMITTAL						

Attorney Docket No.		No.	20402-00639-US1					
First Ir	ventor	Kiny	va Hasegawa					
Title	NONIN' APPAR MEASU	VASI\ ATUS JRING	/E CONTINUOUS BLOOD MEASURING S AND A METHOD OF NONINVASIVELY S CONTINUOUS BLOOD PRESSURE					
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(Only for new nonprovisional applications under 37	CFR 1.53(b))		MEASURING CONTINUOUS BLOOD PRESSURE					
			ess Mail Label No.					
APPLICATION ELEMENT See MPEP chapter 600 concerning utility patent			ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
	Pages 64 D 1 She ets 17 I She ets 2 FR 1.63(d)) ompleted)	9. 10 7] 11 1 12 13	Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Statement (IDS)/PTO-1449 13. X Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. (Should be specifically itemized) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
6. X Application Data Sheet. See 37 CFR 1.7	76	17	17. Other:					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation X Divisional Continuation-in-part (CIP) of prior application No.: 10/057,910 Prior application information: Examiner R. Nasser Art Unit: 3736 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The Incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
	19. COR	RESPON	IDENCE ADDRESS					
X Customer Number:		30	O678 OR Correspondence address below					
Name								
Address								
City	State	•	Zip Code					
Country	Tele	phone	Fax					
Name (Print/Type) Morris Liss Registration No. (Attorne y/Agent) 24,510								
Signature Thorp. Nu.	Ben 1	Reg. NO.	. 45,528 Date November 26, 2003					

Use	in lieu of P	TO/SB/17	(08-03)
orm updated to reflect FY	2004 fees	effective	10/1/03)

			Complet if Known					
FEE TRANSMITTAL		111111111111						
		Application Number Filing Date				Concurrently Herewith		
for FY 2004		First Named Inventor			ntor	Kinya Hasegawa		
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name			1101	Not Yet A		
Applicant claims small entity status. See 37 CFR 1.27						N/A	100.g.1.00	
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Art Ur		acket N)639-US1	
(7)		Attorn	ey U	ocket No				
METHOD OF PAYMENT (check all that apply)						ATION (co	ontinued)	
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X Depos it Account:		•						
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Account Number 22-0185	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	cription	Fee Paid
Deposit Control Contro	1051	130	2051	65	Surcharge	- late filing fe	e or oath	
Account Name Connolly Bove Lodge & Hutz LLP					_	_	onal filing fee or cover	
The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.		one many ree or core.	
X Charge fee(s) indicated below X Cred it any overpayments	1053	130	1053	130	Non-Englis	h specificatio	n	
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520	For filing a r	equest for ex p	parte reexamination	
	1804	920°	1804	920°			of SIR prior to	
to the above -identified deposit account.	1805	1,840*	1805	1 840*	Examiner a Requesting	publication (of SIR after	
FEE CALCULATION	1251	110	2251	-	Examiner a	iction or reply within		-
1. BASIC FILING FEE	1252	420	2252			or reply within		
Large Entity Small Entity	1253	950	2253			or reply within		
Fee Fee Fee Fee Fee Fee Pald Code (\$) Code (\$)	1254	1,480	2254	740	Extension f	or reply within	n fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	E xtension f	or reply within	n fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165		otice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403		Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1452	1,510	1451 2452				offic use proceeding	
SUBTOTAL (1) (\$) 770.00	1453	110 1,330	2452			evive – unav evive - uninte		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		fee (or reiss		
Extra Fee from	1502	480	2502	240	Design issu	•		
Total Claims 3 -20** = x = 0.00	1503	640	2503	320	Plant issue			
Independent 3 -3** = x = 0.00	1460	130	1460	130	Petitions to	the Commiss	sioner	
Multiple Dependent =	1807	50	1807	50	Processing	fee under 37	CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission	of Information	on Disclosure Stmt	
Fee Fee Fee Fee Fee Description	8021	40	8021	40			ssignment per	
Code (\$) Code (\$)	1809	770		385			of properties) final rejection	
1201 86 2201 43 Independent claims in excess of 3	1009	770	2809	365	(37 CFR 1.			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		dditional invei 37CFR 1.129		
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385			xamination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	of a design	r expedited ex application	xamination	
and over original patent	Other	fee (spec	cify)			0		
SUBTOTAL (2) (S) 0.00	*Redu	iced by E	Basic F	iling Fee	Paid	SUBTO	TAL (3) (\$)	0.00
**or number previously paid, if greater; For Reissues, see above								
SUBMITTED BY	ration M-				(Complete	(if applicable))		
Name (Print/Type) Morris Liss		ration No ey/Agent)		,510		Telephone	(202) 331-7111	
Signature Thor & Nielan 1	20-		110	ר יית	d	Date	November 26. 2	2003